Combined Declaration For Patent Application and Power of Attorney  86621WFN									
As below named inventor, I hereby declare that:  My residence, post office address and citizenship are as stated below next to my name,  I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
METHOD FOR RENDERING DIGITAL RADIOGRAPHIC IMAGES FOR DISPLAY BASED ON INDEPENDENT CONTROL OF FUNDAMENTAL IMAGE QUALITY PARAMETERS									
The specification of which (check	only one item bel	ow):					·		
=	X is attached hereto.								
was filed as United State was amended on (if app		rial No. on and							
was filed as PCT interna		Number on an	nd was	amended on lif annlina	hle)				
<del></del>						laima aa	amandad hi	any am	andment
I hereby state that I have reviewed referred to above.	and understand t	ne contents of the	above-	identified specification, in	ciuding the c	iaims, as	amended by	any am	endment
I acknowledge the duty to disclos		nt & Trademark C	Office a	ll information known to m	e to be mate	rial to pa	tentability as	defined	l in Title
<ul><li>37, Code of Federal Regulations,</li><li>I hereby claim foreign priority be</li></ul>	-	35 United States	Code	8119 (a)-*d) or 365 (b) of	any foreign	applicati	ion(s) for pa	tent or i	nventor's
certificate, or (365 (a) of any PCT									
and have also identified below ar									
one country other than the United priority is claimed:	States of America	a filed by me on the	ne same	e subject matter having a r	iling date bei	ore that	or the applica	ation(s)	or which
PRIOR FOREIGN/PCT APPLI	CATION(S) AND	ANY PRIORIT	Y CLA	IMS UNDER 35 U.S.C.	119:		•		
COUNTRY (If PCT, indicate PCT)	AF	PLICATION NUMBER		DATE OF FILING (month/dayyear)			PRIORITY CLAIMED L	NDER 35 USC	§119 NO
							YES		NO NO
		0					YES		NO
**		× .				<u> </u>			<u> </u>
I hereby claim the benefit under T	itle 35, United Sta	ntes Code, 119 §(6	e) of an	y United States provisiona	l application	(s) listed	below:		
PRIOR PROVISIONAL APPLI	CATION(S) AND	ANY PRIORIT	Y CLA	IMS UNDER 35 U.S.C.	§119 (e):				
PROVISIONAL AF	PPLICATION NUMBER		_		FILING DATE (mo	ontt/day/year)			
									*
			_L						
I hereby claim the benefit under Title 35, United States Code, §120 of any prior United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior applications(s) in the manner provided by the first paragraph of Title 35, §112, I acknowledge the duty to disclose to the U.S. Patent & Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations §1.56, which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application:									
PRIOR US APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S FOR BENEFIT UNDER 35USC§120:									
U.S. APPLICATIONS					STATUS (Check one)				
U.S. APPLICATION NUMBER		U.S. FIL	ING DATE	PATENT	ED	PENDING	AB	ANDONED	
					<u> </u>				
PCT APPLICATIONS DESIGNATING THE U.S.									
PCT APPLICATION NO. PCT FILING DATE		NG DATE	U.S. SERIAL NUMBERS ASSIGNED (if any)						
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Complined Declaration F	r Pat int Application and P	wer of Att in \	i (Continuea)

ATTORNEY DOCKET 86621WFN

POWER OF ATTORNEY: As a named inventor, I hereby appoint the attorney(s) and/or agent(s) associated with Eastman Kodak Company <u>Customer No. 01333</u> to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

s	nd Corresp	ondence to:		Direct Telephone Calls to:	
	Patent Legal Staff (name and telephone number)				
Eastman Kodak Company				W:11: F N1	
343 State Street				William F. Noval	
		Rochester N	Y 14650-2201	585-477-5272	
		Teochester, 14	1 14030-2201	FAX: 585-477-4646	
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME	
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٤.		Senn	Robert STATE OR FOREIGN COUNTRY	A.	
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2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME	
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· з	BUSINESS ADDRESS	BUSINESS ADDRESS	СПУ	STATE & ZIP CODE (COUNTRY)	
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME	
0	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
4	BUSINESS ADDRESS	BUSINESS ADDRESS	CITY	STATE & ZIP CODE (COUNTRY)	
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME	
0	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
5	BUSINESS ADDRESS	BUSINESS ADDRESS	CITY	STATE & ZIP CODE (COUNTRY)	
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME	
0	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
6	BUSINESS ADDRESS	BUSINESS ADDRESS	СІТУ	STATE & ZIP CODE (COUNTRY)	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
Mar 6	Robert A. Jenn	
ĐATE /	DATE	DATE
7-24-03	7-24-03	·
SIGNATURE OF INVENTOR 204	SIGNATURE OF INVENTOR 205	SIGNATURE OF INVENTOR 206
•		*
DATE	DATE	DATE